PTO/SB/01 (10-00)

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DECLARA	TION	l		ket Number	PRD-2	043			
AND POWER OF AT	OF ATTORNEY TY OR DESIGN APPLICATION OFR 1.63) Declaration Submitte		First Named I	nventor	Berkne	er			
FOR UTILITY O			COMPLETE IF KNOWN						
PATENT APPL (37 CFR 1		charge	Application N	umber					
□ Declaration Submitted with □ Initial Filing OR			Filing Date						
Ç			Group Art Un	it					
			Examiner Na	me					
As a below named inventor, I he	reby declare that:								
My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
ONE STEP PROCESS FOR THE PREPARATION OF ANTICONVULSANT DERIVATIVES (Title of the Invention)									
the specification of which									
is attached hereto									
OR									
was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY)									
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.									
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.									
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.									
Prior Foreign Application Number(s)	Country		Filing Date DD/YYYY)	Priority Not Claim	ed	Certifie Attac YES			
Additional foreign application	numbere ere linte	d on a sun	blemental priori	U data sheet	PTO/SR	U U U U U U U U U U U U U U U U U U U	d hereto:		

DECLARATION - Utility or Design Patent Application							
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.							
Application Number(s) Filing Date (MM/DD/YYYY)							
60/451,863	March 4, 2003	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.					
Lhoroby claim the benefit under Title 35. Hr	nited States Code, §120 of any United States	s application(s) listed below and insofar					
as the subject matter of each of the claims	of this application is not disclosed in the prior	United States application in the manner					
provided by the first paragraph of Title 35 L	Inited States Code, §112, I acknowledge the	e duty to disclose material information as					
defined in Title 37. Code of Federal Regular	tions, §1.56(a) which occurred between the	filing date of the prior application and the					
national or PCT international filing date of the							
Application Serial No.	Filing Date	Status					
I hereby appoint:		Place Customer					
	000007777	Place Customer					
☑ Practitioners at Customer Number	000027777 →	Number Bar Code					
****		Label Here					
AND							
Practitioner(s) named below:							
Name	Registration Number						
<u>Ivamo</u>	regoridaen ranser						
	ecute the application identified above, and	to transact all business in the United					
States Patent and Trademark Office conn	nected therewith.						
Address all Asianhana and 4- Elli- Clariting	Calatti et tolonhano number (720) 524 2407						
Address all telephone calls to Ellen Ciambrone C	Joietti at telepriorie flumber (732) 324-2197.						
	mer Number						
Direct all correspondence to:	r Code Label 000027777 OR	☐ Correspondence address below					
Name:							
Address:							
Address:							
	·	T					
O.L.	State:	ZIP					
City:	State.						
Country	Telephone:	Fax:					

I hereby declare that all statements mainformation and belief are believed to that willful false statements and the lik U.S.C. 1001 and that such willful false issued thereon.	be true; and further e so made are puni	that these sta shable by fine	itements were r e or imprisonme	nade with the knowledge int, or both, under 18				
NAME OF SOLE OR FIRST INVENTOR:	A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any]) Joachim		Family Name or Sumame Berkner		ıer				
			Date					
Residence: City Suwanee	State GA	Cour	try USA	Citizenship Germany				
Mailing Address 1061 Moores Walk Lane								
City Suwanee	State GA		30024	Country USA				
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF SECOND INVENTOR:	A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any]) Scott	Family Name or Sumame Duncan							
Inventor's Signature			Date					
Residence: City Madison	State WI	Cour	ntry USA	Citizenship USA				
Mailing Address 10 Stonecrest Circle								
City Madison	State WI	ZIP 53717		Country USA				
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF THIRD INVENTOR:	☐ A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any]) John		Family Name or Surname						
Inventor's Signature			Date					
Residence: City Hatfield	State PA	Cou	ntry USA	CitizenshipUSA				
Mailing Address 643 Sourwood Drive								
City Hatfield	State PA	ZIP	19440	Country USA				

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